FORM D

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# UNITED STATES SECURITIES AND EXCHANGE C..... Washington, D.C. 20549

02045471

MB APPROVAL

umber: 3235-0076 : November 30, 2001

ted average burden per response . . . 16.00

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Series E Preferred Stock, the underlying common stock issuable upon conversion thereof; warrant	
Series E Preferred Stock issuable upon exercise thereof, the underlying common stock issuable up	on conversion thereof
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing:  New Filing  Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	SEF V = ZUUL
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	<i>   </i>
Intertainer, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
10950 Washington Blvd, Third Floor, Culver City, CA 90232-6025	(310) 202-2900
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Entertainment on Demand	PROCESSE!
Type of Business Organization	4 0 2002
☐ corporation ☐ limited partnership, already formed ☐ othe	r (please specify): 4 SEP 1 U ZUUZ
business trust limited partnership, to be formed	
Month Year	THOMSON
	Actual Estimated FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	E
ه النظام الماسان الماسية والماسية والمنيسية مباه والمناسية والماسية والماسية والمناسية والمناسية والمناسية والم	

### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

<del>`</del>			A PACKO POENZ	WILCON DAMA					
2. F	Enter the information re	equested for the fol		IFICATION DATA	<u> </u>				
	• Each promoter of the issuer, if the issuer has been organized within the past five years;								
•	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity								
	securities of the iss		corporate issuers and of o	ornorate general and manag	ing partners of pa	rtnership issuers; and			
_	<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full N	ame (Last name first, i Baskin, Richard	f individual)							
Busine			reet, City, State, Zip Code or, Culver City, CA 9023						
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full N	ame (Last name first, if Chechik, Jeremiah								
Busine			reet, City, State, Zip Code; r, Culver City, CA 9023			· · · · · · · · · · · · · · · · · · ·			
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full N	ame (Last name first, if Taplin, Jonathan	individual)			- <u>,</u>				
Busine			reet, City, State, Zip Code) r, Culver City, CA 90232						
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Na	me (Last name first, if Beattie, Richard I.	individual)							
Busine			reet, City, State, Zip Code) Lexington Avenue, New						
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Na	me (Last name first, if Butts, Karlton	individual)							
Busines			eet, City, State, Zip Code)						
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Na	me (Last name first, if Dorr, Chris	individual)							
Busines			eet, City, State, Zip Code) , Culver City, CA 90232						
Check I	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Na	me (Last name first, if Yee, Lily N.	individual)							
Busines			eet, City, State, Zip Code) , Culver City, CA 90232						

			IFICATION DATA					
2. Enter the information re	quested for the foll	owing:						
<ul> <li>Each promoter of t</li> </ul>	• Each promoter of the issuer, if the issuer has been organized within the past five years;							
	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
<ul> <li>Each executive off</li> </ul>								
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i Vigil, Hank	f individual)							
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)						
		rosoft Way Redmond, W						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, in Microsoft Corporation)								
Business or Residence Addre		reet City State Zin Code)		<del></del>				
One Microsoft Wa	y Redmond, Wash	nington 98052						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name first, it	•							
Higgins, Edward J	ſ <b>.</b>		·	· · · · · · · · · · · · · · · · · · ·				
Business or Residence Addre c/o Merrill Lynch,		eet, City, State, Zip Code) 23 <sup>rd</sup> Floor, New York, N						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Yudkovitz, Martin								
Business or Residence Addre	ss (Number and Str	eet, City, State, Zip Code)						
c/o NBC, Inc. 30 I	Rockefeller Plaza,	New York, NY 10112		•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if Poole, William	individual)							
Business or Residence Address	ss (Number and Str	eet, City, State, Zip Code)						
	·	rosoft Way Redmond, Wa						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first, if Rodriguez, Enriqu								
Business or Residence Address		eet City State Zin Code)			~ <del>~~~</del>			
		N. Meridian Street, MS		N 46290-1024				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if Newhouse, Douglas			· .					
Business or Residence Address		eet City State 7in Code)		<del> </del>				
		st Road West Westport,	CT 06880					

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: 2. Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter Beneficial Owner Executive Officer □ Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) DePirro, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 10950 Washington Blvd, Third Floor, Culver City, CA 90232-6025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Executive Officer □ Director Check Box(es) that Apply: ☐ Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer ☐ Director Promoter Check Box(es) that Apply: ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INFO	RMATION	N ABOUT (	OFFERING			<del></del>	<del></del>	
1. H	as the issue	r sold, or o	loes the is		l to sell, to	non-accred	ited investor	s in this offe	ering?			Yes	No
2. W	hat is the n	ninimum ii	nvestment					iling under l			\$n/a		
2. **	nat is the i	iniiiiiuiii ii	ivestillen	tilat Will D	c accepted	nom any m	dividual:	*****************	***************************************		<u>piva</u>	Yes	No No
3. De	oes the offe	ring permi	t joint ow	nership of	a single un	it?				•••••			
co a ¡ sta	mmission of person to bates, list the	or similar r e listed is e name of	emunerati an associa the broke	on for soli ted person r or dealer	citation of or agent of . If more	purchasers of a broker of than five (5	in connection or dealer reg	on with sales gistered with b be listed a	of securities the SEC ar	y or indirects in the offend/or with a d persons of	ring. If state or	·	
Full Na	me (Last na	ame first, i	f individu	al)									
Busines	s or Reside	ence Addre	ess (Numb	er and Stre	et, City, St	ate, Zip Co	de)				,	<del></del>	
Name o	f Associate	d Broker o	or Dealer	,						<del></del>			
						olicit Purcha		<del></del>	<del></del>		<del></del>		
(Che	ck "All Stat	es" or che	ck individ	ual States)			****************				•••••	[] Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	[ID	]
[IL]	[IN]	[]A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	-
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	(PA	-
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	PR	<u> </u>
Full Nar	ne (Last na	me first, if	individua	1)									
Business	s or Reside	nce Addres	ss (Numbe	er and Stree	et, City, St	ate, Zip Coo	le)			<del></del>	<del></del>		
Name of	Associated	i Broker o	r Dealer					=					·
						licit Purcha							l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC	)]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[ P A	.]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	]
Full Nan	ne (Last nai	ne first, if	individua	1)									
Business	or Residen	ice Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Coc	le)	<del> </del>		<del></del>	<del></del>		
Name of	Associated	Broker or	Dealer								<u> </u>		
						icit Purcha					<del></del>		
							••••••	•					States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA] [NV]	[KS]	[KY]	[LA]. [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] {OK}	[MS]	[MO [PA	
[MT]	[NE] [SC]	[SD]	[NH] [TN]	[NJ] [TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[OR] [WY]	[PR	
	r - 1			. ,									-

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$25,000,000	\$15,780,001.40
	☐ Common ☑ Preferred Series E	+==,===,===	429,700,001140
	Convertible Securities (including warrants)	\$See note 1 belov	* \$See note 2 below
	Partnership Interests	\$ 0	\$ 0
	Other (Specify)	\$ 0	\$ 0
	Total	\$25,000,000	\$15,780,001.40
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ22,000,000	Ψ15,760,001.40
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ <u>15,780,001.40</u>
	Non-accredited Investors	n/a	\$ <u>n/a</u>
	Total (for filings under Rule 504 only)	n/a	\$ <u>n/a</u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	n/a	\$n/a
	Regulation A	n/a	\$n/a
	Rule 504	n/a	\$n/a
	Total	n/a	\$n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	· [	□ \$0
	Printing and Engraving Costs		\$0
	Legal Fees		\$ \$200,000
	Accounting Fees	_	\$0
	Engineering Fees		3 \$0
	Sales Commissions (specify finder's fees separately)		3 <del>v</del> <u>v</u> 3 so
	Other Expenses (identify)	_	3 \$ <u>0</u>
	Total		\$200,000
	= =====================================	-	<del>-</del> ' <u></u> -

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Note 1. Warrants for up to 615,864 shares of Series E have been offered at an exercise price to be determined in the future and 1 warrant for 300,000 shares of Series E has been offered at an exercise price of \$.01 per share.

Note 2. Warrants for 176,245 Series E has been issued at an exercise price to be determined in the future and a warrant for 300,000 Series E has been issued as an exercise price of \$0.01.

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	ND U	USE OF PROCEE	DS	
	Question 1 and total expenses furnished in	aggregate offering price given in response esponse to Part C – Question 4.a. This different	nce is	the	\$	24,800,000
5.	Indicate below the amount of the adjusted used for each of the purposes shown. If estimate and check the box to the left of the the adjusted gross proceeds to the issuer set.					
				Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			\$0		\$0
	Purchase, rental or leasing and installa	tion of machinery and equipment		\$ <u>0</u>		\$0
	Construction or leasing of plant buildi	ngs and facilities		\$0		\$0
	offering that may be used in exchange	g the value of securities involved in this for the assets or securities of another		\$0		\$0
Repayment of indebtedness				\$0		\$0
	Working capital			\$0		\$24,800,000
	Other (specify): \[ \square  \qqq            \q					
					. $\square$	\$
				\$0		\$24,800,000
	Total Payments Listed (column totals	added)			⊠ \$ <u>2</u> 4	1,800,000
		D. FEDERAL SIGNATURE				
foll	lowing signature constitutes an undertaking b	gned by the undersigned duly authorized per y the issuer to furnish to the U.S. Securities and o any non-accredited investor pursuant to parag	d Exc	hange Commission	, upon	der Rule 505, the written request of
Issuer (Print or Type) Signature				Date		<del> </del>
Int	ertainer, Inc.	Kantha Sith		August 29, 2002	2	
Na	me or Signer (Print or Type)	Title of Signer (Print or Type)				
Ka	rlton Butts	Vice President, Business & Legal Affairs				

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)